0 9 2004 an Act of 1995

PTO/SB/01 (08-03) Approved for use through 07/31/2006, OMB 0651-0032
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& TRADE Attorney Docket Number BIOSTAR.04.01 **DECLARATION FOR UTILITY OR** First Named Inventor **DESIGN** Pranger COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number 10/787,522 Filing Date 2/26/2004 Declaration Declaration Submitted OR Submitted after Initial Art Unit 3761 With Initial Filing (surcharge (37 CFR 1.16 (e)) Filing

required)

Examiner Name

	requirec						 	
I hereby declare that:	٠٠٠ دي							
Each inventor's residence, ma	iling address, a	nd citizenship are a	s stated b	elow next to	their name.			
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Self-contained micromechanical ventilator								
the appeiding of which		(Title of the	Invention)					
the specification of which								
is attached hereto								
OR								
was filed on (MM/DD/YYYY) 02/26/2004 as United States Application Number or PCT International								
Application Number 10.	/787,522	and was amended	on (MM/l	DD/YYYY)			(if applicable).	
I hereby state that I have revie amended by any amendment			of the abo	ve identified :	specification	n, including	the claims, as	
I acknowledge the duty to di continuation-in-part application and the national or PCT intern	ns, material info	ormation which bed	ame avail	able betweer				
I hereby claim foreign priority	benefits unde	r 35 U.S.C. 119(a)	-(d) or (f)	or 365(b) o	f any foreig	n applicati	on(s) for patent,	
inventor's or plant breeder's ri country other than the United								
application for patent, inventor	r's or plant bree	der's rights certifica						
before that of the application of Prior Foreign Application	n which phority	Foreign Filing	Date	Prio	rity	Certified	Copy Attached?	
Number(s)	Country	(MM/DD/YY		Not Cla		Yes	No No	
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Additional foreign applicat	ion numbers ar	e listed on a supple	mentai pri	ority data she	et PTO/SB	/υ2B attacl	nea nereto.	

[Page 1 of 2]
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Custome	r Number:				OR 🗸	Corresp	ondence address below
Name Ms. Abanti Bhattacharyya Singla, Es	sq.							
Address Bartunek & Bhattacharyya, Ltd. 10420 Little Patuxent Parkway, Suit	e 405						-	-
City								ZIP
Columbia				MD				21044
Country		Telephon	е	Fax				
USA		(410) 964-	9553			(410) 964-26	60	
I hereby declare that all statem and belief are believed to be statements and the like so mad false statements may jeopardiz	e true; and fur de are punishat	ther that one of the by fine	these stat or impriso	emen onmer	ts were	made with th, under 18	the kno	wledge that willful false
NAME OF SOLE OR FIRST IN	VENTOR:		ПАр	etition	has be	en filed for th	is unsign	ed inventor
Given Name (first and middle [i	f any])				F	amily Name	or Surna	me
L. Alex					Pranger			
Inventor's Signature								Date 7/1/04
Residence: City	State			Cou	ntry		Citizer	
Gaithersburg	MD			USA USA			USA	
Mailing Address 18609 Phoebe Way							1,	
City	State				ZIP			Country
Gaithersburg	MD				20879			USA
NAME OF SECOND INVENTO	R:] A pe	etition has bee	en filed f	or this unsigned inventor
Given Name (first and middle	[if any])				Fa	mily Name o	r Surnan	ne
William P.					Wie	esmann		
Inventor's Signature	y Ulu	au-						Date Date
Residence: City	State	•		Cou	ntry		Citizer	nship \
Washington	DC			USA USA			USA	
Mailing Address 1231 28th Street NW								
City	State				ZIP		Counti	ту
Washington	DC		<u> </u>		20007		USA	
Additional inventors or a legal re	presentative are bei	ng named or	the 1	supplem	nental she	et(s) PTO/SB/02/	or 02LR a	attached hereto.

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DECLARATION		Supplemental S	Sheet	Page -	1 of	
Name of Additional Joint Inventor, if any:		☐ A petition	has been filed for this	unsigned in	ventor	
		A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any)	-	Family Name or Urias	Surname			
Adrian R.		Unas				
Inventor's Advant. Was					4006,100	
Gaithersburg Residence: City	MD State	USA	untry	USA Citizenship		
1022 Southern Night Lane Mailing Address						
Mailing Address						
Gaithersburg	MD		20879	USA	* ** ***	
City	State)	Zip	Country		
Name of Additional Joint Inventor, if any:		☐ A petition	has been filed for this	unsigned in	ventor	
Given Name (first and middle (if any)			Family Name or	Sumame		
Inventor's Signature		Date				
Residence: City	State)	Country		Citizenship	
Mailing Address						
Mailing Address						
City	State		Zip	Country		
Name of Additional Joint Inventor, if any:		A petition	has been filed for this	unsigned inv	ventor	
Given Name (first and middle (if any)		Family Name or Surname				
Inventor's Signature		Date				
Residence: City	State		Country		Citizenship	
Mailing Address						
Mailing Address						
City	State		Zip	Country		

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Application Number 10/787.522

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ed to respond to a collection of into	rmation unless it displays a valid OMB control number.
Application Number	10/787,522
Filing Date	2/26/2004
First Named Inventor	Pranger
Title	Self-contained micromechanical
Art Unit	3761
Examiner Name	
Attorney Docket Number	BIOSTAR.04.01

I hereby appoint:						
Practitioners associated	with the Customer Number:					
OR						
Practitioner(s) named be	low:					
	Name		Registration I	Number		
Ms. Abanti Bhattachary	ya Singla, Esq.		36,681	<u> </u>		
as my/our attorney(s) or agent(Trademark Office connected the	s) to prosecute the application identified a erewith.	above, and to tr	ansact all business i	in the United States Patent and		
	e correspondence address for the above- ed with the above-mentioned Customer N		cation to:			
The address associated	ed with Customer Number:					
OR						
Firm or Individual Name	Ms. Abanti Bhattacharyya Singla, Esq.					
Address	Address Bartunek & Bhattacharyya, Ltd.					
Address	10420 Little Patuxent Parkway, Suite 40					
City	Columbia	State	MD	Zip 21044		
Country	USA	I Foy	(440) 004 0000			
Telephone I am the:	(410) 964-9553	Fax	(410) 964-2660	·		
Applicant/Inventor. Assignee of record of	the entire interest. See 37 CFR 3.71. FR 3.73(b) is enclosed. (Form PTO/SB/s	96)				
-	SIGNATURE of Applican	t or Assignee o	of Record	· · · · · · · · · · · · · · · · · · ·		
Name L. Alex Pranger	0					
Signature //illy	hi-					
Date TI	2004		Telephone (301) 428-9818		
NOTE: Signatures of all the invento forms if more than one signature is	or assignees of record of the entire interest or assignees of record of the entire interest or required, see below*.	or their representa	ative(s) are required. Su	ubmit multiple		
*Total of 3	forms are submitted.					

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ed to respond to a collection of info	mation unless it displays a valid OMB control number.
Application Number	10/787,522
Filing Date	2/26/2004
First Named Inventor	Pranger
Title	Self-contained micromechanical
Art Unit	3761
Examiner Name	
Attorney Docket Number	BIOSTAR.04.01

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I hereby appoint:					٦
Practitioners associated	with the Customer Number:				
OR			- · · · · · · · · · · · · · · · · · · ·		
Practitioner(s) named be	low:				
	Name		Registrat	ion Nu	ımber
Ms. Abanti Bhattacharyy	ya Singla, Esq.		36	,681	
	···				
as my/our attorney(s) or agent(Trademark Office connected the	s) to prosecute the application identified a erewith.	above, and to	transact all busine	ess in	the United States Patent and
Diagon recognize or shapes the	an and an and an an and an	identified one	lication to		
Please recognize or change the	e correspondence address for the above-	наепшеа арр	iication to:		
The address associate	ed with the above-mentioned Customer N	dumber:			
OR				٦	
The address associate	ed with Customer Number:				
OR				J	
Firm or Individual Name	Ms. Abanti Bhattacharyya Singla, Esq.				
Address	Bartunek & Bhattacharyya, Ltd.				
Address	10420 Little Patuxent Parkway, Suite 40	05			
City	Columbia	State	MD		Zip 21044
Country	USA				
Telephone	(410) 964-9553	Fax	(410) 964-2660)	
l am the:					
Applicant/Inventor.					
Assignee of record of	the entire interest. See 37 CFR 3.71.				
Statement under 37 C	FR 3.73(b) is enclosed. (Form PTO/SB/9	96)			
	SIGNATURE of Applican	t or Assigned	of Record		
Name William P. Wiesma	19				
Signature \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Much				
Date 7	1 24		Telephone	€ (30	01) 428-9818
NOTE: Signatures of all the invento forms if more than one signature is	rs or assignees of record of the entire interest or required, see below.	or their represe	ntative(s) are require	d. Subi	mit multiple
*Total of 3	forms are submitted.				

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Attorney Docket Number	BIOSTAR.04.01

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I hereby appoint:				$\overline{}$
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Practitioner(s) named be	low:			
	Name		Registration	Number
Ms. Abanti Bhattacharyy	ya Singla, Esq.		36,6	81
as my/our attorney(s) or agent(Trademark Office connected the	s) to prosecute the application identified ab erewith.	ove, and to t	ransact all busines:	s in the United States Patent and
Please recognize or change the	e correspondence address for the above-ide	entified applic	cation to:	
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	ed with the above-mentioned Customer Nu	mber:		
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The address associate	ed with Customer Number:			
OR Firm or	T			
Firm or Individual Name	Ms. Abanti Bhattacharyya Singla, Esq.			
Address	Bartunek & Bhattacharyya, Ltd.			
Address	10420 Little Patuxent Parkway, Suite 405			
City	Columbia	State	MD	Zip 21044
Country	USA		1	
Telephone	(410) 964-9553	Fax	(410) 964-2660	
l am the:				
Application ventor.				
	the entire interest. See 37 CFR 3.71. FR 3.73(b) is enclosed. (Form PTO/SB/96))		
	SIGNATURE of Applicant o	or Assignee	of Record	
Name Adrian R. Urias			-	
Signature \	Man			
Date July 1 2	104		Telephone	(301) 428-9818
NOTE: Signatures of all the inventor forms if more than one signature is	rs or assignees of record of the entire interest or t required, see below*.	their representa	ative(s) are required.	Submit multiple
*Total of 3	forms are submitted.			

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FEE TRANS	ATTIME	Complete if Known					
TEE IRANS	DIVILLIAL	Application Number	10/787,522				
for FY 2	2004	Filing Date	2/26/2004				
		First Named Inventor	Pranger				
Effective 10/01/2003. Patent fees are subject to annual revision. Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 65.00		Examiner Name					
		Art Unit	3761				
		Attorney Docket No.	BIOSTAR.04.01				

Allomey Docket No. DIGGTAIX.04.01							
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)						
✓ Check	3. A[ITIDO	ONAL	. FEE	S		
Deposit Account:	<u>Large E</u>	ntity	Small	Entity			
Deposit Deposit	Fee Code	Fee	Fee Code	Fee (\$)	Fee Description		
Account	1051	130	2051		Surcharge - late filing fee or oath	Fee Paid 65.00	
Number Deposit	1052	50	2052		Surcharge - late provisional filing fee or	03.00	
Account Name	1002	30	2002	25	cover sheet	 	
The Director is authorized to: (check all that apply)	1053	130	1053		Non-English specification		
Charge fee(s) indicated below Credit any overpayments	1812		1812	•	For filing a request for ex parte reexamination	 	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below, except for the filling fee	1805	1,840*	1805	1,840*	Requesting publication of SIR after		
to the above-identified deposit account.					Examiner action		
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month		
1. BASIC FILING FEE	1252	420	2252	210	• •		
Large Entity Small Entity Fee Fee Fee Fee Paid	1253	950	2253	475	Extension for reply within third month		
Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month		
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal		
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55	Petition to revive - unavoidable	L	
	1453	1,330	2453	665	Petition to revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reissue)		
Extra Claims below Fee Paid	1502	480	2502	240	Design issue fee		
Total Claims 20** = X = I	1503	640	2503	320	Plant issue fee		
Claims X = X = X Multiple Dependent	1460	130	1460	130	Petitions to the Commissioner		
Multiple Dependent	1807	50	1807	7 50	Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt		
Code (\$) Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection		
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	(37 CFR 1.129(a)) For each additional invention to be		
1204 86 2204 43 ** Reissue independent claims					examined (37 CFR 1.129(b))	 	
over original patent	1801	770	2801		Request for Continued Examination (RCE)	L	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application		
SUBTOTAL (2) (\$) 0.00		fee (sp				<u> </u>	
**or number previously paid, if greater; For Reissues, see above	"Redu	ced by	Basic F	-iling F	ee Paid SUBTOTAL (3) (\$) 65.00)	

SUBMITTED BY Registration No. Abanti Bhattacharyya Singla, Esq. 36,681 Telephone 410-964-9553 Name (Print/Type) (Attorney/Agent) Signature

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